

Exhibit 7

Fill in this information to identify the case:

Debtor name Jamieson CAPEX Fund, LLC

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ 8,172,488.21

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ 8,172,488.21

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 0.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 0.00

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 3,122,538.90

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ 3,122,538.90

Fill in this information to identify the case:

Debtor name Jamieson CAPEX Fund, LLC

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number (if known) _____

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Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1. <u>Town & Country Credit Union</u>	<u>Savings</u>	<u>922</u>	<u>\$5.00</u>
3.2. <u>Town & Country Credit Union</u>	<u>Checking</u>	<u>922</u>	<u>\$9,565.32</u>
3.3. <u>Capital Credit Union</u>	<u>Checking</u>		<u>Unknown</u>

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$9,570.32

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
- ☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

Debtor Jamieson CAPEX Fund, LLC Case number (if known) _____
Name

11. **Accounts receivable**

11b. Over 90 days old: 150,000.00 - 0.00 =... \$150,000.00
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 469,000.00 - 0.00 =... \$469,000.00
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$619,000.00

Part 4: Investments

13. **Does the debtor own any investments?**

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

			Valuation method used for current value	Current value of debtor's interest
14.	Mutual funds or publicly traded stocks not included in Part 1			
	Name of fund or stock:			
15.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture			
	Name of entity:	% of ownership		
15.1.	<u>630 Main Partners, LLC</u>	<u> </u> %	<u>N/A</u>	<u>\$395,000.00</u>
15.2.	<u>Commons of 56th, LLC</u>	<u> </u> %		<u>\$0.00</u>
15.3.	<u>Greenfield Commons, LLC</u>	<u> </u> %		<u>\$0.00</u>
15.4.	<u>Liberty Development, LLC</u>	<u> </u> %		<u>\$239,776.82</u>
15.5.	<u>Pioneer Place, LLC</u>	<u> </u> %		<u>\$296,693.00</u>
15.6.	<u>Sheyenne 32 East, LLC</u>	<u> </u> %		<u>\$641,282.00</u>
15.7.	<u>Sheyenne 32 South, LLC</u>	<u> </u> %		<u>\$297,788.00</u>

Debtor Jamieson CAPEX Fund, LLC Case number (if known) _____
Name

15.8. SHP Holding, LLC (Sheyanne Place) _____ % _____ \$100,000.00

15.9. Triangle Townhomes, LLC _____ % _____ \$215,921.25

15.10
NSOP _____ % _____ \$490,000.00

15.11
Secure Income Fund _____ % _____ \$291,150.00

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$2,967,611.07

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☒ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Debtor Jamieson CAPEX Fund, LLC Case number (if known) _____
Name

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

<u>Greenfield Commons, LLC</u>	<u>150,000.00</u>	-	<u>0.00</u>	=	<u>\$150,000.00</u>
	Total face amount		doubtful or uncollectible amount		

<u>AMS Holding, LLC</u>	<u>267,935.00</u>	-	<u>0.00</u>	=	<u>\$267,935.00</u>
	Total face amount		doubtful or uncollectible amount		

<u>JAMCO, LLC</u>	<u>57,308.33</u>	-	<u>0.00</u>	=	<u>\$57,308.33</u>
	Total face amount		doubtful or uncollectible amount		

<u>Paramount Property Management, LLC</u>	<u>468,563.49</u>	-	<u>0.00</u>	=	<u>\$468,563.49</u>
	Total face amount		doubtful or uncollectible amount		

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities**74. Causes of action against third parties (whether or not a lawsuit has been filed)**

<u>Claim against First International Bank & Trust</u>	<u>\$1,000,000.00</u>
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Nature of claim	<u>Tort</u>
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Amount requested	<u>\$0.00</u>
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<u>Claim against North Dakota</u>	<u>\$2,600,000.00</u>
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Nature of claim	<u>Tort</u>
------------------------	-------------

Amount requested	<u>\$0.00</u>
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75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**76. Trusts, equitable or future interests in property**

<u>Aspen [Escrow]</u>	<u>\$5,000.00</u>
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<u>116 N 5th St. Bis, ND [Escrow]</u>	<u>\$20,000.00</u>
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Debtor Jamieson CAPEX Fund, LLC Case number (if known) _____
Name

Venture Real Estate Trust \$7,500.00

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$4,576,306.82

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor Jamieson CAPEX Fund, LLC Case number (if known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$9,570.32</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$619,000.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$2,967,611.07</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+ \$4,576,306.82</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$8,172,488.21</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$8,172,488.21</u>

Fill in this information to identify the case:	
Debtor name	Jamieson CAPEX Fund, LLC
United States Bankruptcy Court for the:	DISTRICT OF NORTH DAKOTA
Case number (if known)	

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name Jamieson CAPEX Fund, LLC

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u> <u>\$0.00</u>
2.2	Priority creditor's name and mailing address North Dakota Office of State Tax Commiss 600 E. Boulevard Ave. Dept. 127 Bismarck, ND 58505 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u> <u>\$0.00</u>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Amber Carlson 712 124th Ave NE Finley, ND 58230 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Jamieson CAPEX Fund, LLC Name	Case number (if known)	
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3.2	Nonpriority creditor's name and mailing address Aspire 5195 45TH ST S Fargo , ND 58104 Date(s) debt was incurred _ Last 4 digits of account number <u>1163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.3	Nonpriority creditor's name and mailing address Brad Sunderland 2102 Great Northern Drive Fargo, ND 58102 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100,000.00
3.4	Nonpriority creditor's name and mailing address Capital Credit Union 204 W THAYER AVE Bismarck , ND 58501-3772 Date(s) debt was incurred <u>01.14.21</u> Last 4 digits of account number <u>0710</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.5	Nonpriority creditor's name and mailing address CCU 204 W THAYER AVE Bismarck 58501-3772 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (Accompanying Deed of Trust Unrecorded)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.6	Nonpriority creditor's name and mailing address First International Bank & Trust 100 N MAIN, PO BOX 607 Watford City, ND 58854 Date(s) debt was incurred _ Last 4 digits of account number <u>1642</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.7	Nonpriority creditor's name and mailing address First Western Bank & Trust 900 South Broadway Minot, ND 58701-4658 Date(s) debt was incurred <u>09.21.2021</u> Last 4 digits of account number <u>9123</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.8	Nonpriority creditor's name and mailing address Fred & Karen Browers 38568 296th Ave Waubun, MN 56589 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$768,713.49
3.9	Nonpriority creditor's name and mailing address Jamieson Capital 1420 9TH ST E STE 401 West Fargo , ND 58078-3381 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Jamieson CAPEX Fund, LLC <small>Name</small>	Case number (if known)	
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3.10	Nonpriority creditor's name and mailing address Jamieson Legacy Fund 555 12th Street Ste 900 Oakland, CA 94607 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$118,750.00
3.11	Nonpriority creditor's name and mailing address Jamieson Medical 2865 LILAC LN N Fargo 58102-1706 Date(s) debt was incurred <u>2020.11.18</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185,480.00
3.12	Nonpriority creditor's name and mailing address Jamieson Natural PO BOX 285 West Fargo , ND 58078-0285 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$706,000.00
3.13	Nonpriority creditor's name and mailing address Jamieson Natural Resources Fund, LLC PO BOX 285 West Fargo , ND 58078-0285 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.14	Nonpriority creditor's name and mailing address Jeff Johnson 4001 15th Ave NW Fargo, ND 58102 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300,000.00
3.15	Nonpriority creditor's name and mailing address Jeremy Carlson 2865 Lilac Lane N Fargo, ND 58102 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unpaid Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$83,034.43
3.16	Nonpriority creditor's name and mailing address Main Street Investment 2865 Lilac LN N Fargo, ND 58102-1706 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$155,995.04
3.17	Nonpriority creditor's name and mailing address MJM Investments, LLC 541 16TH ST NE West Fargo , ND 58078-7214 Date(s) debt was incurred <u>19.08.01</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan (No Recorded UCC)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor Jamieson CAPEX Fund, LLC Case number (if known) _____
Name

3.18 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$0.00
Nova DC, LLC
3081 125TH AVE NW
Watford City, ND 58854-9602
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____ Basis for the claim: Unsecured Loan
Last 4 digits of account number _____ Is the claim subject to offset? ☒ No ☐ Yes

3.19 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$579,565.94
Secure Income Fund, LLC
2865 LILAC LN N
Fargo, ND 58102-1706
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____ Basis for the claim: Unsecured Loan
Last 4 digits of account number _____ Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
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Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	\$ 0.00
5b. Total claims from Part 2	+ \$ 3,122,538.90
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ 3,122,538.90

Fill in this information to identify the case:

Debtor name Jamieson CAPEX Fund, LLC

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

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Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name Jamieson CAPEX Fund, LLC

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

**United States Bankruptcy Court
District of North Dakota**

In re Jamieson CAPEX Fund, LLC

Debtor(s)

Case No.

Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Amber Carlson 712 124th Ave NE Finley, ND 58230	Member		2.08
Arthur Mercantile, LLC PO Box 8 Arthur, ND 58006	Member		4.49
Brian Kounovsky 3680 54th Street S Fargo, ND 58104	Member		0.01
Bryan Bartz 555 12th Street Suite 900 Oakland, CA 94607	Member		2.98
Cole Bachmeier 5893 Autumn Drive S Fargo, ND 58104	Member		1.57
Colleen Carlson 6130 12th Street SE Bismarck, ND 58504	Member		2.47
Dale Lian 2861 Lilac Lane N Fargo, ND 58102	Member		2.24
David Griffin 555 12th Street Suite 900 Oakland, CA 94604	Member		4.04
Derek Kane 5832 Crested Butte Rd Bismarck, ND 58503	Member		1.12
Derek Sunderland 4632 Timberline Dr Fargo, ND 58104	Member		2.24
Donna Fricke 918 Senate Dr Bismarck, ND 58501	Member		1.23
Eric Hegerle 2312 5th Street S Fargo, ND 58103	Member		2.57

In re: Jamieson CAPEX Fund, LLC Case No. _____
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LIST OF EQUITY SECURITY HOLDERS
(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Jack Christianson 508 66th Ave North Moffit, ND 58560	Member		5.61
Jason Boutwell 87 N Woodcrest Dr N Fargo, ND 58102	Member		1.29
Jeremy Carlson 2865 Lilac Lane N Fargo, ND 58102	Member		0.45
Jim Stewart 154 S Woodcrest Dr Fargo, ND 58104	Member		1.79
John Biwer 331 St Charles Place West Fargo, ND 58078	Member		1.36
Kara Johnson 555 12th Street Ste 900 Oakland, CA 94607	Member		2.01
KLH&J Land LLC 4001 15th Ave NW Fargo, ND 58102	Member		1.79
Leftfield Development LLC 275 Elks Dr Grand Forks, ND 58201	Member		2.25
Lyons Children Irrevocable Trust 6415 55th Ave SE Bismarck, ND 58504	Member		1.46
Mark Merck 555 12th Street Ste 900 Oakland, CA 94607	Member		5.84
Matthew Bitterman 4406 Daniel Street Bismarck, ND 58504	Member		0.34
Michael Kempel 2809 Lilac Lane N Fargo, ND 58102	Member		2.24

In re: Jamieson CAPEX Fund, LLC Case No. _____
Debtor(s)

LIST OF EQUITY SECURITY HOLDERS
(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Michael Kuntz 275 Elks Dr Grand Forks, ND 58201	Member		2.24
Michael Schuster 5079 Woodhaven Dr S Fargo, ND 58104	Member		1.35
Mike Quast 4703 Harbor Trail SE Mandan, ND 58554	Member		6.73
Rachel Ness 4763 Douglas Drive S Fargo, ND 58104	Member		1.01
Scott Ellefson 63 W Mirror Ridge Circle The Woodlands, TX 77382	Member		2.24
Scott Howe 7725 Ridgeland Dr Bismarck, ND 58503	Member		0.90
Shawn Hegvick 4439 Oakcreek Dr S Fargo, ND 58104	Member		8.51
The Entrust Group f/b/o Brian Carlson 555 12th Street Ste 900 Oakland, CA 94607	Member		2.24
The Entrust Group f/b/o Lynn Carlson 555 12th Street Ste 900 Oakland, ND 94607	Member		1.57
The Entrust Group f/b/o Matthew Retterath 555 12th Street Ste 900 Oakland, CA 94607	Member		0.56
The Entrust Group F/B/O Mike Holland 555 12th Street Ste 900 Oakland, ND 94607	Member		1.97
The Entrust Group f/b/o Scott Gorder 555 12th Street Ste 900 Oakland, CA 94607	Member		2.24

In re: Jamieson CAPEX Fund, LLC Case No. _____
Debtor(s)

LIST OF EQUITY SECURITY HOLDERS
(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Trevor Kittelson 705 6th Ave NE Hillsboro, ND 58045	Member		1.12
Val Marinov 3549 Grandwood Dr N Fargo, ND 58102	Member		6.73
W&S Investment LLC 4401 19th Street SE Mandan, ND 58554	Member		2.28
Wendy Baukol 555 12th Street Ste 900 Oakland, CA 94607	Member		4.84

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the Manager of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date September 22, 2024 Signature /s/ Jeremy Carlson
Jeremy Carlson

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
District of North Dakota

In re Jamieson CAPEX Fund, LLC

Debtor(s)

Case No. _____

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

☐ **FLAT FEE**

For legal services, I have agreed to accept \$ _____

Prior to the filing of this statement I have received \$ _____

Balance Due \$ _____

☒ **RETAINER**

For legal services, I have agreed to accept and received a retainer of \$ 15,000.00*

The undersigned shall bill against the retainer at an hourly rate of \$ 400.00 (partner) /
\$200.00 (associate)

[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify): _____

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify): _____

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Representation of the Debtor in this case, inclusive of any contested matters and adversary proceedings for which special counsel is not engaged.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the Debtor in any matters external to this Honorable Court.

*\$5,288 was drawn from the retainer, shortly before filing, to cover pre-petition work and the filing fee, leaving \$9,712.

In re Jamieson CAPEX Fund, LLC Case No. _____
Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)
(Continuation Sheet)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 22, 2024

Date

/s/ Maurice Verstandig

Maurice Verstandig

Signature of Attorney

The Dakota Bankruptcy Firm

1630 1st Avenue N

Suite B PMB 24

Fargo, North Dakota 58102-4246

Fax:

mac@dakotabankruptcy.com

Name of law firm

**United States Bankruptcy Court
District of North Dakota**

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VERIFICATION OF CREDITOR MATRIX

I, the Manager of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: September 22, 2024

/s/ Jeremy Carlson

Jeremy Carlson/Manager

Signer/Title

Amber Carlson
712 124th Ave NE
Finley, ND 58230

Aspire
5195 45TH ST S
Fargo , ND 58104

Brad Sunderland
2102 Great Northern Drive
Fargo, ND 58102

Capital Credit Union
204 W THAYER AVE
Bismarck , ND 58501-3772

CCU
204 W THAYER AVE
Bismarck 58501-3772

First International Bank & Trust
100 N MAIN, PO BOX 607
Watford City, ND 58854

First Western Bank & Trust
900 South Broadway
Minot, ND 58701-4658

Fred & Karen Browers
38568 296th Ave
Waubun, MN 56589

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

Jamieson Capital
1420 9TH ST E STE 401
West Fargo , ND 58078-3381

Jamieson Legacy Fund
555 12th Street Ste 900
Oakland, CA 94607

Jamieson Medical
2865 LILAC LN N
Fargo 58102-1706

Jamieson Natural
PO BOX 285
West Fargo , ND 58078-0285

Jamieson Natural Resources Fund, LLC
PO BOX 285
West Fargo , ND 58078-0285

Jeff Johnson
4001 15th Ave NW
Fargo, ND 58102

Jeremy Carlson
2865 Lilac Lane N
Fargo, ND 58102

Main Street Investment
2865 Lilac LN N
Fargo, ND 58102-1706

MJM Investments, LLC
541 16TH ST NE
West Fargo , ND 58078-7214

North Dakota Office of State Tax Commiss
600 E. Boulevard Ave. Dept. 127
Bismarck, ND 58505

Nova DC, LLC
3081 125TH AVE NW
Watford City, ND 58854-9602

Secure Income Fund, LLC
2865 LILAC LN N
Fargo, ND 58102-1706

**United States Bankruptcy Court
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CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Jamieson CAPEX Fund, LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

September 22, 2024

Date

/s/ Maurice Verstandig

Maurice Verstandig

Signature of Attorney or Litigant

Counsel for Jamieson CAPEX Fund, LLC

The Dakota Bankruptcy Firm

1630 1st Avenue N

Suite B PMB 24

Fargo, North Dakota 58102-4246

Fax:

mac@dakotabankruptcy.com